State of Maine Department of Education

Gifted and Talented Educational Program Application for One-Year Waiver 2017-18

Gifted and Talented Educational Program Waiver Applications are to be submitted electronically to GT.DOE@maine.gov by **September 30, 2017.**

School administrative unit name:		MDIRSS AOS 9	01- SAD 76			
Name and title of	person responsik	ole for gifted a	nd talented pro	gram:		
Julie Meltzer, Dire	ctor of Curriculum,	Assessment, and	d Instruction			
Phone number:	207-288-5049					
Email address:	mail address: jmeltzer@mdirss.org					
CERTIFICATION: The statements m	ade herein are cor	rect to the has	et of my knowla	dae and hel	inf	
Dr, Marc Edward G	ousse		M Muss Superintender	Jun 1	GD.	
Date Waiver Appli	cation Submitted (to Maine DOE:				
Check Reason(s) fo	or Waiver Request	t:				
X Financial Hardship				X Other		
Partial Program Waiver Request				X Full Program Waiver Request		

Please completely describe the basis for the SAU's one-year waiver request and further describe how the SAU is meeting the needs of the gifted and talented population in your district (Use as much space as necessary):

This school serves 34 students with 4 full time teaching staff. Instruction is highly individualized to meet student needs and staffing does not allow for dedicated GT staffing.

FOR INFORMATION CONTACT:

RETURN BY EMAIL TO:

GT.DOE@maine.gov

EF-S-206

Revised May 2, 2017

DUE DATE: September 30, 2017

Maine DOE Approval:

_____ Date of Approval: 10/3/19